Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application of Docket Number
09/699582
0/1/299/83
10110

CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER THAN		
(Co				1) (Column 2)			T	TYPE			OR SMALL ENTITY			
TOTAL CLAIMS								RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			45 minus 20=		. 25			X\$ 9=	225	OR	X\$18=			
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=	80	OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II											OTHER THAN			
(Column 1) (Colu						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FÆE		RATE	ADDI- TIONAL FEE		
	Total	· 13	Minus	4	45	=		X\$ 9=		OR	X\$18=			
AME	Independent	· 3	Minus	FNDENI	T CLAIM	=		X40=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +270=														
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)												٠		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL PEE		RATE	ADDI- TIONAL FEE		
	Total	· /3	Minus	•• 4	45	=		X\$ 9=		OR	X\$18=			
ME	Independent	• 3	Minus	***	5	=	1 [X49=		OR	X80=			
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	T CLAIM		」	+135=		OR	+270=			
∂ TOTAL										OR	TOTAL			
	ADDIT. FEE													
		(Column 1) CLAIMS		HIGH		(Column 3)	7 -			1		4501		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDM	Total		Minus	**		=		X\$ 9=		OR	X\$18=			
ME	Independent	•	Minus	***		=	 	X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚┝				070			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3," ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3,"														
•	The "Highest Num	ber Previously Pai	d For" (Total or	Independ	lent) is the	highest numb	er loun	d in the app	propriate box	in col	umn 1.			